10/796241

PTO/SB/01A (08-03)
Approved for use through 06/30/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number

RADIAL POPPET-TYPE CHECK VALVE WITH CLOSURE ASSIST FEATURE

DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

Title of Invention

As the below named inventor(s), I/we declare that:						
This declaration is directed to:						
The attached application, or						
Application No, filed on,						
as amended on(if applicable);						
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;						
I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;						
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.						
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.						
FULL NAME OF INVENTOR(S)						
Inventor one: Timothy D. Price Date: 3/4/04						
Signature:Citizen of: _US						
Inventor two: Robert V. Funderburk Date: 3/4/04						
Signature: Moueil V. Fundabuse Citizen of: US						
Inventor three: Gareth P. Taylor Date: 2/9/04						
Signature:Citizen of: _US						
Inventor four:						
Signature:Citizen of:						
Additional inventors or a legal representative are being named onadditional form(s) attached hereto.						

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1 minute to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/81 (09-03) Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	
Filing Date	03/09/2004
First Named Inventor	Price
Title	RADIAL POPPET-TYPE CHECK VALVE
Art Unit	
Examiner Name	
Attorney Docket Number	1970/51

				
I hereby appoint:				
Practitioners associated with the Customer Number:		2363	8	
OR	·			
Practitioner(s) named below:				
Name			Registratio	n Number
as my/our attorney(s) or agent(s) to prosecute the application Trademark Office connected therewith.	identified above,	and to tra	nsact all busines	ss in the United States Patent and
Please recognize or change the correspondence address for t	the above-identifie	ed applica	ution to:	
The address associated with the above-mentioned C	Customer Number	:		
OR				
The address associated with Customer Number:				
OR				
Firm or Individual Name				
Address				
Address				
City		State		Zip
Country		T		
Telephone	1	Fax		
Applicant/Inventor.				
Assignee of record of the entire interest. See 37 CFR Statement under 37 CFR 3.73(b) is enclosed. (Form				<u></u>
SIGNATURE of	Applicant or Ass	ignee of	Record	
Name Timothy D. Price				
Signature firmation / Sheet				·
Date 3/4/04-			Telephone	704-375-9249
NOTE: Signatures of all the inventors or assignees of record of the enti- forms if more than one signature is required, see below.	ire interest or their re	presentativ	ve(s) are required.	Submit multiple
*Total of 3 forms are submitted.				

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/81 (09-03)
Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	
Filing Date	03/09/2004
First Named Inventor	Price
Title	RADIAL POPPET-TYPE CHECK VALVE
Art Unit	
Examiner Name	
Attorney Docket Number	1970/51

1 harahi	· · · · · · · · · · · · · · · · · · ·						
Inereo	y appoint:						
√ F	ractitioners associated	with the Customer Number:		236	38		
OF	२	ļ	L				
Practitioner(s) named below:							
	Name Registration Number						
as my/o Tradem	our attorney(s) or agent(s ark Office connected the	s) to prosecute the application erewith.	identified a	above, and to tr	ansact all busine	ss in the L	Jnited States Patent and
Please	recognize or change the	e correspondence address for t	he above-	identified applic	ation to:		
\checkmark		ed with the above-mentioned C					
O)R	ſ		****			
	The address associate	ed with Customer Number:					
. 0	PR .	L					
	Firm or Individual Name						
	ddress						
	ddress				<u>,</u>		
	city			State		Zip	
	elephone			LEOV	r	· · · · · · · · · · · · · · · · · · ·	
I am the	_ :			Fax			
$\overline{\checkmark}$	Applicant/Inventor.						
		he entire interest. See 37 CFR FR 3.73(b) is enclosed. (Form I		6)			
SIGNATURE of Applicant or Assignee of Record							
Name	Robert V. Funderbu	ırk , ,					
Signature Wohet V. Juniviens							
Date	3/4/04				Telephone	704-375-	-9249
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.							
✓ *1	Total of 3 for	forms are submitted.					

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

(CO 00) 10/88/07/1 Approved for use through 11/36/2005, OMB 0051-0005
U.S. Peters and Trudennish Office, U.S. DEPARTMENT OF COMMERCE metion unimo a displays a val d OMB control number Under the Paperviors Reduction Act of 1995, no persons are requi Application Number Filing Date 03/09/2004 POWER OF ATTORNEY First Named Inventor Pruzu and Title RADIAL POPPET-TYPE CHECK VALVE **CORRESPONDENCE ADDRESS** Art Unit INDICATION FORM Examiner Name Attorney Docket Number 1070/51 I hereby appoint. 23038 Practitionum associated with the Customer Number DR Practitioner(s) rismad below Name Registration Number as my/our allomny(s) or agent(s) to prosecute the application utentified above, and to transact all blasmoss in the United States Patent and Trademark Office corrupcted therewith [Apase recognize or change the correspondence address for the above-identified application to The address associated with the above-mentioned Customer Number. OF The address associated with Customer Number: Firm or Individual Name Address Address City State Zip Country Telephone Fax i am mo \mathbf{I} **Applican/Inventor** Assigned of record of this entire titlerest. Sec 37 CFR 3 71 Statement under 37 CFH 3 FU(b) is enclosed (Form PTO/SB/pa) SIGNATURE of Applicant or Assigned of Record Name Gareth P. Talylo Signalure Totophone 704-375-8249 NOTE: Signatures of all the immedia of esseguces of record of the entire interest or that representative(s) are required. Bluent multiple furno il more than ono signature to requisod, see below.

This essection of information is required by 37 CFR 1,31 and 1,33. The information is required to distant or rolate a benefit by the public which is to the (and by the UEPTO to process) an explanation. Conficuntially is governed by 35 U.S.C. 122 and 37 CFR 1.4. Then especiation is estimated to take 3 remained to completely actually grathoung, properties, and examining the completed application form to the UEPTO. Time with vary departing upon the incredual carso. Any completely and the information of the you require to completely this form which suggestions for reducing this borden, about the center of the Client Information Officer, U.S. Department of Commission, P.O. Box 1450, Assanders, VA 27313 1480. DO NOT SEND FEES OR COMPLETED FORMED TO THIS ADDRESS. SEND TO: Commission for Patents, P.O. Box 1450, Alexanders, VA 22313-1460.

7 olul of 3

... forms are submitted.